

#12

**COMBINED AMENDMENT & PETITION FOR EXTENSION OF
TIME UNDER 37 CFR 1.136(a) (Large Entity)**

Docket No.
MR/98-004.C

In Re Application Of: **GEORGE J. MISIC**

Serial No.
10/082,818

Filing Date
2/25/2002

Examiner
Louis M. Arana

Group Art Unit
2859

Invention: **MULTIMODE OPERATION OF QUADRATURE PHASED ARRAY MR COILS SYSTEMS**



TO THE ASSISTANT COMMISSIONER FOR PATENTS:

This is a combined amendment and petition under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the Office Action of 11/18/2002 in the above-identified application.

Date

The requested extension is as follows (check time period desired):

One month Two months Three months Four months Five months

from: 2/18/2003 *Date* until: 7/18/2003 *Date*

Adjustment date: 08/06/2003 AKELLEY
07/11/2003 AWONDAF1 00000109 132530 10082818
04 FC:1255 1970.00 CR

RECEIVED

JUL 11 2003

OFFICE OF PETITIONS

The fee for the amendment and extension of time has been calculated as shown below:

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	34 -	21 =	13	x \$18.00	\$234.00
INDEP. CLAIMS	4 -	3 =	1	x \$84.00	\$84.00
FEE FOR AMENDMENT					\$318.00
FEE FOR EXTENSION OF TIME					\$1,970.00
TOTAL FEE FOR AMENDMENT AND EXTENSION OF TIME					\$2,288.00

07/11/2003 AWONDAF1 00000109 132530 10082818

04 FC:1255 1970.00 DA

**COMBINED AMENDMENT & PETITION FOR EXTENSION OF
TIME UNDER 37 CFR 1.136(a) (Large Entity)**

Docket No.
MR/98-004.C

The fee for the amendment and extension of time is to be paid as follows:

A check in the amount of \$2,288.00 for the amendment and extension of time is enclosed.

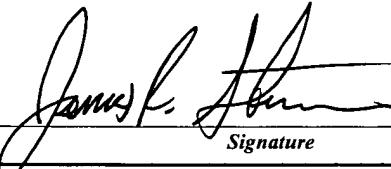
Please charge Deposit Account No. 13-2530 in the amount of \$2,288.00
A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 13-2530
A duplicate copy of this sheet is enclosed.

Any additional filing fees required under 37 C.F.R. 1.16.

Any patent application processing fees under 37 CFR 1.17.

If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to Deposit Account No. 13-2530 A duplicate copy of this sheet is enclosed.



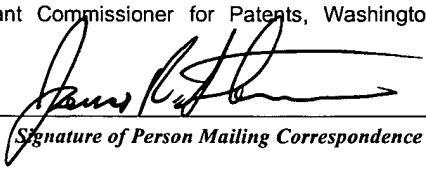
Signature

James R. Stevenson
Medrad, Inc.
One Medrad Drive
Indianapolis, IN 46251

cc:

Dated: July 7, 2003

I certify that this document and fee is being deposited on 7/7/2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.



Signature of Person Mailing Correspondence

James R. Stevenson

Typed or Printed Name of Person Mailing Correspondence

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 8-5-03 2 Serial/Patent # 10/082,818

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input checked="" type="checkbox"/>	Extension of Time	12	7-10-03	\$1970 —
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$
		7 TOTAL AMOUNT OF REFUND	\$ 1970 —	
		8 TO BE REFUNDED BY:		
10 REASON:		Treasury Check		
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:	
<input type="checkbox"/>	Duplicate Payment	,	1 3 -- 2 5 3 0	
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	extension not necessary		

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: E. Lannoue

TITLE: Pat-Atty.

SIGNATURE: E. Lannoue

PHONE: 306-9200

OFFICE: 4700

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APPROVED: Alicia Kelly

DATE: 8/6/03

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B